



St. Gabriel the Archangel Parish / St. Madeleine Sophie Parish
 3040 Hamburg Street / 3514 Carman Road
 Schenectady, NY 12303
FFO@SMSPARISH.ORG / (518)355-3115

Where are you a *registered* Parish member? St. Gabriel's _____ St. Madeleine Sophie _____
 Another Parish? No _____ Yes _____ Name of your Church: _____

To become a parishioner of SGA/SMS Churches, contact the Faith Formation Office or click this link to register:
<https://smssgabparish.org/wp-content/uploads/2023/05/Parish-Registration-2023.pdf>

2026-2027 FAITH FORMATION PROGRAM REGISTRATION FOR GRADES 1-11

Family Last Name:	Child's Last Name (if different):
Mailing Address:	City/Zip:
Home Phone:	Mother's Maiden Name:
Father's Name:	Mother's Name:
E-mail:	E-mail:
Cell:	Cell:
Work:	Work:
Occupation:	Occupation:
Religion:	Religion:

Marital status: () Married () Single () Separated () Divorced () Widowed
 Another parent address where mail should be sent? _____

<u>SMS/SGA FAITH FORMATION FEES FOR 2026-27 PROGRAM YEAR</u>			
FEE PAYMENT DATES	1 CHILD	2 CHILDREN	FAMILY - 3 OR MORE
By 7/1/26	\$75	\$130	\$160
After 7/1/26	\$95	\$155	\$185
<u>2026-27 Sacramental Fees:</u> <u>add \$25 per First Communion Child and/or Confirmation Candidate</u>		<u>2026-27 Non-Parishioner Fee:</u> <u>add \$50 family fee to help defray Parish expenses for the SMS/SGA FF Program</u>	

Fees can be paid in cash, by checks made payable to Saint Madeleine Sophie Church, or online at <https://www.wesharegiving.org/App/Form/acd3eccb-20ce-4c9d-9093-872c2fa625f6>.
PLEASE RETURN YOUR FF FORM WITH FEE TO ST. MADELEINE SOPHIE FAITH FORMATION OFFICE!

For office use only: Staff _____		Date Received: _____	Reg. #: _____
Fee rec'd: \$ _____	Pd. By: Check # _____	Cash: _____	E:-giving: _____
Active in PDS? _____	In classes? _____	Folders? _____	Bapt. Certificate per child? _____

2026-2027 SMS/SGA FAITH FORMATION SESSION SCHEDULE FOR GRADES 1 TO 11

(The schedule below will be revised if there aren't enough students enrolled or catechists to teach.)

➔ *Based on Diocesan guidelines, children need to complete Faith Formation sessions (which begin in the fall) and Sacramental preparation before receiving First Communion or Confirmation this year.*



USE SESSION {LETTERS} BELOW TO ENROLL EACH CHILD IN THE SMS/SGA FAITH FORMATION PROGRAM			
<u>Session</u>	<u>Grade</u>	<u>Day/Time</u>	<u>Students Meet:</u>
{A}	Grades 1-5	Tuesday 5:00 - 6:00 PM	Weekly at SGA School Bldg.
{B}	Grades 1-5	Thursday 4:00 - 5:00 PM	Weekly at SMS School Bldg./Parish Hall
{C}	Grades 6-10	Sunday 12 noon - 1:00 PM	<i>10 Sessions</i> – SGA School Bldg.
{D}	Grades 6-10	Monday 6:30 - 7:30 PM	<i>10 Sessions</i> – SGA School Bldg.
{E}	Gr. 11, Confirmation	Sunday 12 noon - 1:30 PM	Confirmation Prep - SMS Parish Hall <i>*Please write "E" for Session letter</i>
{F}	Gr. 11, Confirmation	Monday 6:30 - 8pm	Confirmation Prep - SMS Parish Hall <i>*Please write "F" for Session letter</i>
{G}	Grades 1, 3-10	<i>*Independent Study – At Home</i>	Complete Grade level book/required on-line chapter reviews; ➔ <i>*Not for Grade 2 or 11</i>

1. Name: _____ Faith Formation Gr. in 9/26: _____ Session letter: _____
 Birthdate: _____ School Grade: _____ Public School: _____
 Is this child a Baptized Catholic? _____ NO _____ YES at: _____ SMS *or* _____ St. Gabriel's
 _____ Other? (Church Name/address): _____

2. Name: _____ Faith Formation Gr. in 9/26: _____ Session letter: _____
 Birthdate: _____ School Grade: _____ Public School: _____
 Is this child a Baptized Catholic? _____ NO _____ YES at: _____ SMS *or* _____ St. Gabriel's
 _____ Other? (Church Name/address): _____

3. Name: _____ Faith Formation Gr. in 9/26: _____ Session letter: _____
 Birthdate: _____ School Grade: _____ Public School: _____
 Is this child a Baptized Catholic? _____ NO _____ YES at: _____ SMS *or* _____ St. Gabriel's
 _____ Other? (Church Name/address): _____

- Are you registering a new child this year? _____ No _____ Yes. (If your child wasn't baptized at SMS/St. Gabriel's Churches, we need a copy of the Baptismal Certificate from your Church.)
- Do you have a child in Grade 3 or older who needs to be baptized or receive First Communion?
 _____ No _____ Yes - Child's name: _____
- Any food allergies, medical, educational issues?

2026-27 Faith Formation Program Volunteer Opportunities

Are **YOU** interested in lending a hand? Please consider helping in one or more of the ways below!

No, not at this time

YES, I/we can serve in the following ways:

(check all that apply):

Catechist (Teacher)

Classroom Aide to Catechist

Substitute Catechist: I would be available on _____ (day of week)

High School Youth as a Catechist/Aide for grades 1-5

Safety/Hall Monitor during Faith Formation sessions

Office Aide during class sessions

Children's Liturgy of the Word Catechist/Aide at Sunday Mass

Baker for Faith Formation events (i.e., Confirmation reception, First Communion retreat, etc.)

Volunteer at receptions/events

Chaperone for service projects, activities

Parent/Guardian Consent - Photo/Video Release

Permission is granted for my child(ren) to be photographed during class sessions and related activities sponsored by the Faith Formation Office during the 2025-26 program year. I further agree that these photos (still and moving) **may be used without names** in a variety of contexts to spotlight the Faith Formation Program, including Parish and Diocesan websites, parish bulletin boards/newsletters, news releases for **The Evangelist** and community newspapers, etc.

Permission is NOT granted for my child(ren) to be photographed while participating in Faith Formation sessions/activities during the 2025-26 program year, except for projects to be sent home with my child(ren).

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Consent – Parish Buildings

I/we understand that on occasion, the Faith Formation children/youth walk over to the Church or other Parish buildings for religious services or instruction with their classes and catechists. By signing below, I/we give permission for my/our child(ren) to leave the classroom/school building for this purpose.

Parent/Guardian Signature: _____ Date: _____